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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Hyosun First name Eor Middle name Uh Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5395	

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Case number (if known)

Debtor 1 Hyosun Eor Uh

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 146 Livingston St Northvale, NJ 07647 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Bergen County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Hyosun Eor Uh

7.	The chapter of the						S.C. § 342(b) for Individu	uals Filing for Bankruptcy
	Bankruptcy Code you are choosing to file under	`	,, ,	go to the top of page	e 1 and check the a	ppropriate box.		
		☐ Chap						
		☐ Chap	oter 11					
		☐ Chap	oter 12					
		■ Chap	oter 13					
3.	How you will pay the fee	ab or	out how yo	u may pay. Typically attorney is submittin	, if you are paying	the fee yourself,	you may pay with cash	r local court for more details n, cashier's check, or money n a credit card or check with
						this option, sign	n and attach the Applica	ation for Individuals to Pay
			-	e in Installments (Off t my fee he waived	,	this option only	if you are filing for Char	oter 7. By law, a judge may,
		bu ap	it is not requipolities to you	uired to, waive your f ur family size and yo	fee, and may do so u are unable to pay	only if your inco	ome is less than 150% of	of the official poverty line that this option, you must fill out
).	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.						
			District	Newark	When	2/02/18	Case number	1812155
			District		When		Case number	
			District		When		Case number	
0.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
		☐ Yes.	Has yo	ur landlord obtained	an eviction judgme	ent against you?		
				No. Go to line 12.				
				Yes. Fill out Initial S	Statement About an	Eviction Judam	ent Against You (Form	101A) and file it as part of

Case 19-12931-RG Doc 1 Filed 02/13/19 Entered 02/13/19 07:00:46 Desc Main Document Page 4 of 31 Case number (if known) **Hyosun Eor Uh** Debtor 1 Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure **Bankruptcy Code and are** you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat

of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Hyosun Eor Uh

Debtor 1 Hyosun Eor Uh

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Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Hyosun Eor Uh Signature of Debtor 2 **Hyosun Eor Uh** Signature of Debtor 1 Executed on February 13, 2019 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

Hyosun Eor Uh

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Debtor 1 Hyosun Eor Uh Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Donald	T Bonomo, Esq.	Date	February 13, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Donald T I	Bonomo, Esq.		
Perez and	Bonomo		
Firm name			
11 State S			
Second Fl	oor		
Hackensa	ck, NJ 07601		
Number, Street,	City, State & ZIP Code		
Contact phone	201-820-2033	Email address	dbonomo123@gmail.com
02489-200	2 NJ		
Bar number & S	tata		

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Fill in t	his inform	ation to identify your		eni Pade 8 01 SI			
Debtor	1	Hyosun Eor Uh					
Debtor :		First Name	Middle Name Middle Name	Last Name Last Name			
United	States Ban	kruptcy Court for the:	DISTRICT OF NEW JEE	KOET			
Case nu (if known)							k if this is an ded filing
		m 106Sum	and Liabilities ar	nd Certain Statistica	Unformation		12/15
Be as co	omplete a tion. Fill o ginal form	nd accurate as possik ut all of your schedul	ole. If two married people es first; then complete the	e are filing together, both are entering the information on this form. If keep the box at the top of this page	qually responsible for	or supplyir	ng correct
						Your a	seate
							of what you own
1. Sc	chedule A/	B: Property (Official Feet 55, Total real estate, f	orm 106A/B) rom Schedule A/B			\$	350,000.00
1b	. Copy line	e 62, Total personal pro	perty, from Schedule A/B			\$	0.00
1c	. Copy line	63, Total of all propert	y on Schedule A/B			\$	350,000.00
Part 2:	Summa	rize Your Liabilities					
							abilities t you owe
			laims Secured by Property mn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Pa	art 1 of Schedule D	\$	0.00
			Unsecured Claims (Officia 1 (priority unsecured claim	l Form 106E/F) ns) from line 6e of <i>Schedule E/F</i> .		\$	0.00
3b	. Copy the	e total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E	E/F	\$	35,787.00
					Your total liabilities	\$	35,787.00
Part 3:	Summa	rize Your Income and	l Expenses				

Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Document

Debtor 1 Hyosun Eor Uh

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

1,000.00 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		ta Citta a		

		Doc	ument	Page 10 of 31			
Fill in this infor	mation to identify your case and	d this filing	:				
Debtor 1	Hyosun Eor Uh						
		iddle Name		Last Name			
Debtor 2	F:						
(Spouse, if filing)	First Name M	iddle Name		Last Name			
United States Ba	ankruptcy Court for the: DISTRIC	CT OF NEV	V JERSEY				
Coco numbor						_	
Case number				_			Check if this is an amended filing
							amenaca iiiing
Official Fo	orm 106A/B						
Schedul	le A/B: Property						12/15
	separately list and describe items. L	ist on asset	only once If	on accet fits in more than one	ontogony list the ass	ot in the	
Answer every que Part 1: Describe	re space is needed, attach a separat stion. Each Residence, Building, Land, or have any legal or equitable interest	Other Real	Estate You O	own or Have an Interest In	s, write your name and	case nu	ımber (if known).
	nave any legal of equitable interest	in any resid	crice, barrani	j, lana, or similar property.			
☐ No. Go to Pa	art 2.						
Yes. Where	is the property?						
1.1		What	is the proper	ty? Check all that apply			
	gston Street	_	Single-family		Do not doduct coours	مما ماماسم	or exemptions Dut
	s, if available, or other description	_ =		ulti-unit building	Do not deduct secure the amount of any se		
			•	m or cooperative	Creditors Who Have	Claims S	Secured by Property.
			00110011111101				
			Manufacture	d or mobile home	Current value of the	, c	current value of the
Northvale	e NJ 07647-0000		Land		entire property?		ortion you own?
City	State ZIP Code		Investment p	property	\$350,000.0)0	\$350,000.00
			Timeshare		Describe the nature	of your	ownership interest
			Other		(such as fee simple a life estate), if know		y by the entireties, or
		Who		st in the property? Check one	a life estate), il kilot	VII.	
Bergen		_	Debtor 1 only	•			
County		_	Debtor 2 only	=			
				d Debtor 2 only of the debtors and another	Check if this is (see instructions)	commu	nity property
				you wish to add about this ite	,		
			erty identification	-	iii, saoii as iocai		
			-				
					_		
2. Add the dol	llar value of the portion you owr	for all of	your entries	from Part 1, including any	entries for		¢250,000,00
pages you l	have attached for Part 1. Write tl	nat numbe	r here		=>		\$350,000.00
Part 2: Describe	e Your Vehicles						
	ase, or have legal or equitable in					ny vehic	cles you own that
someone else dr	ives. If you lease a vehicle, also re	port it on S	criedule G: E	Executory Contracts and Uni	expireu Leases.		
3. Cars, vans, ti	rucks, tractors, sport utility vehi	cles, moto	rcycles				
■ No							
□ Yes							

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Debt	or 1	Hyosun Eor Uh			Document		age 11 of 31 Case number (if kn	own)	
							s, other vehicles, and accessories mobiles, motorcycle accessories		
	No								
	Yes								
							Part 2, including any entries for	>	\$0.00
Part 3	3: D	escribe Your Personal and	d House	ehold Items					
Do y	ou o	wn or have any legal o	r equita	able interest	in any of the follo	wing	j items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
		hold goods and furnish ples: Major appliances, fu		, linens, china	a, kitchenware				
	No								
Ш	Yes	. Describe							
_	xamı				, ,	ipme	ent; computers, printers, scanners; mu	sic colle	ctions; electronic devices
	No Yes	. Describe							
		tibles of value							
E.	xamı					ooks,	, pictures, or other art objects; stamp,	coin, or	baseball card collections;
	No Yes	Describe							
E.	xamı	nent for sports and hole bles: Sports, photographi musical instruments	ic, exerc	cise, and oth	er hobby equipment	; bicy	ycles, pool tables, golf clubs, skis; can	oes and	kayaks; carpentry tools;
	No Yes	. Describe							
10. F									
		nples: Pistols, rifles, shot	guns, a	mmunition, a	and related equipme	nt			
	No Ves	. Describe							
11. C		nples: Everyday clothes,	furs, lea	ather coats, o	designer wear, shoe	s, ac	cessories		
	No	Describe							
12. J			costum	e jewelry, en	gagement rings, we	dding	g rings, heirloom jewelry, watches, ger	ns, gold	, silver
	No	Deceribe							
		. Describe							
-		arm animals nples: Dogs, cats, birds, I	horses						
	No								
		. Describe							
	ny c No	other personal and hous	sehold	items you d	lid not already list,	inclu	uding any health aids you did not li	st	
		. Give specific information	on						

Official Form 106A/B Schedule A/B: Property page 2

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Document Page 12 of 31 Case number (if known) Debtor 1 **Hyosun Eor Uh** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$0.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Institution name: ☐ Yes..... 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

Filed 02/13/19 Entered 02/13/19 07:00:46 Case 19-12931-RG Doc 1 Page 13 of 31 Document Case number (if known) Debtor 1 Hyosun Eor Uh 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

Schedule A/B: Property

\$0.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Official Form 106A/B

Case 19-12931-RG Doc 1 Filed 02/13/19 Entered 02/13/19 07:00:46 Document Page 14 of 31 Case number (if known) Debtor 1 **Hyosun Eor Uh** 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$350,000.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$0.00 Part 4: Total financial assets, line 36 58. \$0.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$0.00 Copy personal property total \$0.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$350,000.00

Official Form 106A/B Schedule A/B: Property page 5

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		Document	Page 15 of 31	_
in this infor	mation to identify your	case:		
otor 1	Hyosun Eor Uh			
	First Name	Middle Name	Last Name	
otor 2 use if, filing)	First Name	Middle Name	Last Name	
ted States Ba	inkruptcy Court for the:	DISTRICT OF NEW JERSE	Υ	
se number _ own)		<u>-</u>		☐ Check if this is an amended filing
		operty You Cla	im as Exempt	4/16
property you l ded, fill out ar	isted on <i>Schedule A/B: P</i> and attach to this page as r	roperty (Official Form 106A/B)	as your source, list the property that you	claim as exempt. If more space is
cific dollar a applicable s Is—may be u nption to a p ne applicable	mount as exempt. Alteri tatutory limit. Some exe inlimited in dollar amou particular dollar amount e statutory amount.	natively, you may claim the femptions—such as those for int. However, if you claim an and the value of the propert	ull fair market value of the property be health aids, rights to receive certain b exemption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the
		•	n if your angular in filing with you	
_	i exemblions are vou ci			
		aiming? Check one only, even	, , , , , , , , , , , , , , , , , , , ,	
You are c	aiming state and federal		, , , , , , , , , , , , , , , , , , , ,	
	aiming state and federal	nonbankruptcy exemptions. ns. 11 U.S.C. § 522(b)(2)	, , , , , , , , , , , , , , , , , , , ,	
For any pro	aiming state and federal	nonbankruptcy exemptions. ns. 11 U.S.C. § 522(b)(2) ule A/B that you claim as exe	11 U.S.C. § 522(b)(3)	Specific laws that allow exemption
For any pro	aiming state and federal aiming federal exemption perty you list on Schedulion of the property and line	nonbankruptcy exemptions. ns. 11 U.S.C. § 522(b)(2) ule A/B that you claim as exe	11 U.S.C. § 522(b)(3) empt, fill in the information below.	Specific laws that allow exemption
For any property Brief descript Schedule A/B	laiming state and federal laiming federal exemption perty you list on Schedulion of the property and line that lists this property	nonbankruptcy exemptions. ns. 11 U.S.C. § 522(b)(2) ule A/B that you claim as exe e on Current value of the portion you own Copy the value from Schedule A/B	empt, fill in the information below. Amount of the exemption you claim	Specific laws that allow exemption 11 U.S.C. § 522(d)(1)
For any property Schedule A/B 146 Living 07647 Ber	laiming state and federal laiming federal exemption perty you list on Schedulion of the property and line that lists this property	nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2) Let A/B that you claim as exemption you own Copy the value from Schedule A/B	empt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	
	potor 2 use if, filing) red States Base e number own) ficial Fo chedul s complete a property you I ded, fill out and an number (if k each item of cific dollar an applicable s ls—may be u mption to a p the applicable t1: Identi	First Name otor 2 use if, filing) First Name and States Bankruptcy Court for the: see number own) Ficial Form 106C Chedule C: The Pro see complete and accurate as possible. For operty you listed on Schedule A/B: Pled, fill out and attach to this page as remained in the country of	First Name Middle Name And States Bankruptcy Court for the: DISTRICT OF NEW JERSE Be number own) Ficial Form 106C Chedule C: The Property You Claim Secomplete and accurate as possible. If two married people are filing property you listed on Schedule A/B: Property (Official Form 106A/B) and attach to this page as many copies of Part 2: Additional number (if known). Beach item of property you claim as exempt, you must specify the sific dollar amount as exempt. Alternatively, you may claim the fapplicable statutory limit. Some exemptions—such as those for is—may be unlimited in dollar amount. However, if you claim an another to a particular dollar amount and the value of the property.	First Name Middle Name Last Name And Stor 2 Juse if, filing) First Name Middle Name Last Name Middle Name Last Name The States Bankruptcy Court for the: DISTRICT OF NEW JERSEY DISTRICT OF NEW

Case 19-12931-R		Entere <u>Page 16 o</u>	d 02/13/19 0 of 31	7:00:46 Desc	: Main
Fill in this information to identify yo					
Debtor 1 Hyosun Eor U	h				
First Name		ast Name			
Debtor 2					
(Spouse if, filing) First Name	Middle Name La	ast Name			
United States Bankruptcy Court for th	e: DISTRICT OF NEW JERSEY				
Case number					
(if known)				_	if this is an
				amend	ded filing
Official Form 106D					
Schedule D: Creditor	s Who Have Claims Se	ecured	by Propert	v	12/15
	e. If two married people are filing together, I t out, number the entries, and attach it to the				
1. Do any creditors have claims secured	by your property?				
☐ No. Check this box and submit	this form to the court with your other sch	hedules. You	have nothing else to	o report on this form.	
■ Yes. Fill in all of the information	n below.				
Part 1: List All Secured Claims					
	a more than one opposed claim list the gradita	r concretely	Column A	Column B	Column C
for each claim. If more than one creditor h	s more than one secured claim, list the credito as a particular claim, list the other creditors in etical order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
US Trust N A As Trustee			value of collateral.		·
of Bungalow Seri	Describe the property that secures the	claim:	\$0.00	\$350,000.00	\$0.00
Creditor's Name Freidman Vartolo LLP	146 Livingston Street Northval 07647 Bergen County	e, NJ			
85 Broad Street	As of the date you file, the claim is: Cher	1 1141 4			
Suite 501	apply.	ck all that			
New York, NY 10004	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_	☐ An agreement you made (such as more	tagae or coourc	od.		
■ Debtor 1 only □ Debtor 2 only	car loan)	igage of secure	eu .		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechar	nic's lien)			
☐ At least one of the debtors and another	<u> </u>	ille 3 liett)			
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				

Add the dollar value of your entries in Column A on this page. Write that number here: \$0.00 If this is the last page of your form, add the dollar value totals from all pages. \$0.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	0436 13 12301 NO	Document Document	Page 1	7 of 31	0.40 B000 Ma	
Fill in	this information to identify your ca		1 1000. 1	W O I		
Debto	r 1 Hyosun Eor Uh					
0000	First Name	Middle Name	Last Name			
Debto						
(Spouse	if, filing) First Name	Middle Name	Last Name			
United	States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case r	number					
(if knowr					☐ Check if this	is an
					amended fili	ng
⊃ffi⊲	ial Form 106E/F					
	edule E/F: Creditors Wh	a Haya Unagayrad	Claima		4.	2/15
	omplete and accurate as possible. Use			Don't O for one different with MONE		
ichedu eft. Atta ame ai	le G: Executory Contracts and Unexpire le D: Creditors Who Have Claims Secure ach the Continuation Page to this page. Indicase number (if known).	ed by Property. If more space is n If you have no information to rep	eeded, copy	the Part you need, fill it out, n	umber the entries in the b	boxes on the
Part 1						
_	any creditors have priority unsecured o	ciaims against you?				
_	No. Go to Part 2.					
	Yes.	Unacasumad Claims				
Part 2						
_	any creditors have nonpriority unsecur					
Ц	No. You have nothing to report in this part	. Submit this form to the court with y	our other sche	dules.		
	Yes.					
uns tha	et all of your nonpriority unsecured clair secured claim, list the creditor separately for an one creditor holds a particular claim, list rt 2.	or each claim. For each claim listed,	identify what t	type of claim it is. Do not list clai	ms already included in Part	t 1. If more
					Total clain	n
4.1	American Honda Finance	Last 4 digits of acco	unt number	9856		\$0.00
	Nonpriority Creditor's Name			Onemad 04/00 Leat A		
	Attn: Bankruptcy Po Box 168088	When was the debt	incurred?	Opened 04/09 Last A 05/12	ctive	
	Irving, TX 75016					
	Number Street City State Zip Code	As of the date you fi	le, the claim i	is: Check all that apply		
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and anoth	· ·· ·	TY unsecured	d claim:		
	☐ Check if this claim is for a commu					
	debt Is the claim subject to offset?	☐ Obligations arising report as priority clain		aration agreement or divorce tha	t you did not	
	■ No			g plans, and other similar debts	i e	
	□ Yes	Other Specify				
		()ther Specify F	MICHICALIC	,		

Best Case Bankruptcy

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Document Page 18 of 31 Debtor 1 Hyosun Eor Uh ase number (if known) 4.2 **American Honda Finance** Last 4 digits of account number 4572 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/07 Last Active Po Box 168088 When was the debt incurred? 06/08 Irving, TX 75016 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Bank Of America** Last 4 digits of account number 3334 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 06/04 Last Active Po Box 982238 When was the debt incurred? 11/08 El Paso, TX 79998 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Bsi Financial Services** 4.4 Last 4 digits of account number Unknown 1137 Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/10 Last Active Po Box 517 When was the debt incurred? 12/15 Titusville, PA 16354 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Real Estate Mortgage

☐ Check if this claim is for a community

Is the claim subject to offset?

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Debto	or 1 Hyosun Eor Uh	Document Page 1	9 of 31 Case number (if known)	
4.5	Capital One Auto Finance	Last 4 digits of account number	1001	\$35,787.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/18 Last Active 11/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Automobile	9	
4.6	CCO Mortgage Corp.	Last 4 digits of account number	6200	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy 10561 Telegraph Rd Glen Allen, VA 23059	When was the debt incurred?	Opened 01/11 Last Active 07/16	
	Number Street City State Zip Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify Home Equi	ty Line Of Credit	
4.7	Chase Card Services	Last 4 digits of account number	1094	Unknown
	Nonpriority Creditor's Name Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 07/96 Last Active 12/10	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	L CHECK II THIS CIAIM IS IOI A COMMINUMITY			

Official Form 106 E/F

debt

■ No □ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Debt	or 1 Hyosun Eor Uh		U 0T 31 Case number (if known)					
1.8	Chase Mortgage	Last 4 digits of account number	8069	\$0.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 24696 Columbus, OH 43224	When was the debt incurred?	Opened 10/07 Last Active 02/10					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other. Specify						
1.9	Chase Mortgage	Last 4 digits of account number	0842	\$0.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 24696 Columbus, OH 43224	When was the debt incurred?	Opened 06/06 Last Active 09/09					
	Number Street City State Zip Code	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other. Specify Real Estate	e Mortgage					
4.1)	Chase Mortgage	Last 4 digits of account number	2341	\$0.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Dept		Opened 02/10 Last Active					
	Po Box 24696 Columbus, OH 43224	When was the debt incurred?	03/15					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					

■ No ☐ Yes

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Debt	or 1 Hyosun Eor Uh	Document Page 2	1 of 31 Case number (if known)	
4.1	People's United Bank	Last 4 digits of account number	0001	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	Opened 01/11 Last Active 07/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Check Cred	dit Or Line Of Credit	
4.1	Seterus, Inc.	Last 4 digits of account number	1137	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1077	When was the debt incurred?	Opened 02/10 Last Active 12/15	
	Hartford, CT 06143 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1 3	United Equitable Mtg	Last 4 digits of account number	0709	Unknown
	Nonpriority Creditor's Name	_		
	5495 Belt Line Rd Ste 20 Dallas, TX 75254	When was the debt incurred?	Opened 06/09 Last Active 10/12	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	

Part 3: List Others to Be Notified About a Debt That You Already Listed

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ No □ Yes

Other. Specify

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Hyosun Eor Uh

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				-	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ——	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	35,787.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	35,787.00

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	in this information to identify your of									
Del	btor 1 Hyosun Eo	r Uh								
	btor 2				_					
Uni	ited States Bankruptcy Court for the	e: DISTRICT OF NEW	JERSEY		_					
	se number nown)		-				amende uppleme	d filing ent showing	g postpetition ollowing date:	
0	fficial Form 106I					MM	/ DD/ Y	YYY		
S	chedule I: Your Inc	ome					, 55, .			12/15
spo atta	plying correct information. If you use. If you are separated and you ach a separate sheet to this form. The separate sheet to this form. The separate sheet to this form.	ur spouse is not filing w On the top of any additi	ith you, do not includ	de inforn	nation	about yo	our spo	use. If mo	ore space is	needed,
1.	Fill in your employment information.		Debtor 1			D	ebtor 2	or non-fi	ling spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	oyed		
	attach a separate page with information about additional employers.	Occupation	☐ Not employed				☐ Not er	mployed		
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Pai	rt 2: Give Details About Mo	nthly Income								
	imate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	port for a	any line	e, write \$	0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spouse have mee space, attach a separate sheet to		ombine the information	n for all e	mploye	ers for tha	at perso	n on the lir	nes below. If	you need
					F	or Debto	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,00	00.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3		4.	\$	1.000	.00	\$	N/A	

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Debt	or 1	Hyosun Eor Uh	-	С	ase number	(if known)				
					For Debtor		non-	Debtor filing s	pouse	
	Cop	by line 4 here	4.		\$1,0	00.00	\$		N/A	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. :	\$	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	. :	\$	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.		\$	0.00	\$		N/A	_
	5e.	Insurance	5e.		\$ \$	0.00	\$_		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.		ֆ \$	0.00	\$ \$		N/A N/A	_
	5h.	Other deductions. Specify:	5h.		\$		+ \$		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		*	0.00	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	7	·	0.00	\$		N/A	_
			٧.	•	Ψ <u> </u>	00.00	Ψ		IN/A	-
8.	8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.		\$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.00	\$		N/A	-
	8d.	Unemployment compensation	8d.	. :	\$	0.00	\$		N/A	
	8e.	Social Security	8e.	. :	\$	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	;	\$	0.00	\$		N/A	
	8g.	Pension or retirement income	8g.	. :	\$	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$	0.00	+ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$		N/	4
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1,000.0	00 + \$		N/A	= \$	1,000.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		–	1,000.	-		147	-	1,000.00
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe					chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	1,000.00
13.	Do	you expect an increase or decrease within the year after you file this form	?					·	Combi month	ned ly income
		No.								

Fill in this information to identify your case:								
Debtor 1	Hyosun Eor Uh							
Debtor 2 (Spouse, if filing)								
United States B	ankruptcy Court for the: District of New Jersey							
Case number (if known)								

Check	Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:									
•	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	 Disposable income is determined under 11 U.S.C. § 1325(b)(3). 								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colur Debte		Columnon-fili	
Your gross wages, salary, tips, bonuses, overtim payroll deductions).	e, and co	mmissio	ons (before all	\$	1,000.00	\$	0.00
 Alimony and maintenance payments. Do not included Column B is filled in. 	de payme	nts from	a spouse if	\$	0.00	\$	0.00
 All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Do not include payments from a sport you listed on line 3. Net income from operating a business, 	ort. Include old, your o	e regular depende	contributions nts, parents,	\$	0.00	\$	0.00
profession, or farm	Debtor	1					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or f	farm \$ _	0.00	Copy here ->	\$	0.00	\$	0.00
6. Net income from rental and other real property	Debtor	1					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	- \$	0.00					
Net monthly income from rental or other real property	/ \$	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Hyosun Eor Uh Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ 0.00 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the 0.00 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 1,000.00 0.00 1,000.00 each column. Then add the total for Column A to the total for Column B. Total average Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 1.000.00 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 1,000.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 1.000.00 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12

15b. The result is your current monthly income for the year for this part of the form.

12,000.00

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Debt	or 1	Hyosun Eor Uh		Case number (if known)	
16	. Cal	culate the median family income that applies to y	ou. Follow these s	teps:	
	16a	. Fill in the state in which you live.	NJ	_	
	16b	. Fill in the number of people in your household.	2		
		Fill in the median family income for your state and s	ize of household.	_	\$ 80,302.00
		To find a list of applicable median income amounts instructions for this form. This list may also be avail		e link specified in the separate	*
17		v do the lines compare?			
	17a	11 U.S.C. § 1325(b)(3). Go to Part 3. Do No	OT fill out Calculat	ion of Your Disposable Income (Official Form	n 122C-2).
	17b		lation of Your Dis	m, check box 2, <i>Disposable income is deteri</i> posable Income (Official Form 122C-2). O	
Par	t 3:	Calculate Your Commitment Period Under 11 l	J.S.C. § 1325(b)(4)	
18.	Cop	by your total average monthly income from line 1	l.		\$1,000.00
19.	cont	luct the marital adjustment if it applies. If you are tend that calculating the commitment period under 11 use's income, copy the amount from line 13.	married, your spou U.S.C. § 1325(b)	se is not filing with you, and you (4) allows you to deduct part of your	
	19a	. If the marital adjustment does not apply, fill in 0 on l	ine 19a.		-\$0.00
	19b	. Subtract line 19a from line 18.			\$1,000.00
20.	Cal	culate your current monthly income for the year.	Follow these step	3:	
	20a	. Copy line 19b			\$1,000.00
		Multiply by 12 (the number of months in a year).			x 12
	20b	. The result is your current monthly income for the ye	ear for this part of t	ne form	\$12,000.00
	20c.	. Copy the median family income for your state and s	size of household f	rom line 16c	\$80,302.00
	21.	How do the lines compare?			
		Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	e ordered by the c	ourt, on the top of page 1 of this form, check	box 3, The commitment
		☐ Line 20b is more than or equal to line 20c. Unl commitment period is 5 years. Go to Part 4.	ess otherwise orde	ered by the court, on the top of page 1 of this	form, check box 4, The
Par	t 4:	Sign Below			
	By s	signing here, under penalty of perjury I declare that the	ne information on t	nis statement and in any attachments is true	and correct.
)	(<u>/s/</u>	Hyosun Eor Uh			
		osun Eor Uh gnature of Debtor 1			
		February 13, 2019			
		MM / DD / YYYY			
	-	ou checked 17a, do NOT fill out or file Form 122C-2.	oio form On line Of	of that form convincing augment assettly because	omo from line 4.4 = h - · · ·
	II yc	ou checked 17b, fill out Form 122C-2 and file it with the	iis ioitti. On iine 39	ou manionn, copy your current monthly inco	ine nom line 14 above.

Document Page 28 of 31 UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY Caption in Compliance with D.N.J. LBR 9004-1(b) Donald T Bonomo, Esq. 11 State Street **Second Floor** Hackensack, NJ 07601 201-820-2033 dbonomo123@gmail.com In Re: Case No.: **Hyosun Eor Uh** 13 Chapter: Judge: DISCLOSURE OF CHAPTER 13 DEBTOR'S ATTORNEY COMPENSATION 1. Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for the debtor(s) and that compensation was paid to me within one year before the filed date of the petition, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with this bankruptcy case is as follows: ■ Under D.N.J. LBR 2016-5(b), I have agreed to accept for all legal services required to confirm a plan, subject to the exclusions listed below, including administrative services that may occur postconfirmation, a flat fee in the amount of \$ 3,500.00 . I understand that I must demonstrate that additional services were unforeseeable at the time of the filing of this disclosure if I seek additional compensation and reimbursement of necessary expenses. Legal services on behalf of the debtor in connection with the following are not included in the flat fee: Representation of the debtor in: • adversary proceedings, loss mitigation/loan modification efforts, post-confirmation filings and matters brought before the Court. I have received: \$ 1,500.00 \$ 2,000.00 The balance due is: The balance \square will \blacksquare will not be paid through the plan. □ Under D.N.J. LBR 2016-5(c), I have agreed to accept for legal services provided on behalf of the debtor in this case, an hourly fee of \$ ____. The hourly fee charged by other members of my firm that may provide services to this client range from \$ ____ to \$ ____. I understand that I must receive the Court's approval of any fees or expenses to be paid to me in this case post petition pursuant to D.N.J. LBR 2016-1. I have received: \$ 2. The source of the funds paid to me was: ■ Debtor(s) □ Other (specify below)

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	If a balance is due, the source of future compensation to be paid to me is:	
	■ Debtor(s)	☐ Other (specify below)
	I \square have or \blacksquare have not agreed to share compensation with another person(s) unless they are members of my law f I have agreed to share compensation with a person(s) who is not a member of my law firm, a copy of that ment and a list of the people sharing in the compensation is attached.	
Date:	February 13, 2019	/s/ Donald T Bonomo, Esq.
		Donald T Bonomo, Esq.
		Debtor's Attorney

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American Honda Finance Attn: Bankruptcy Po Box 168088 Irving, TX 75016

American Honda Finance Attn: Bankruptcy Po Box 168088 Irving, TX 75016

Bank Of America Attn: Bankruptcy Po Box 982238 El Paso, TX 79998

Bsi Financial Services Attn: Bankruptcy Po Box 517 Titusville, PA 16354

Capital One Auto Finance Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

CCO Mortgage Corp. Attn: Bankruptcy 10561 Telegraph Rd Glen Allen, VA 23059

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Mortgage Attn: Bankruptcy Dept Po Box 24696 Columbus, OH 43224

Chase Mortgage Attn: Bankruptcy Dept Po Box 24696 Columbus, OH 43224 Chase Mortgage Attn: Bankruptcy Dept Po Box 24696 Columbus, OH 43224

People's United Bank

Seterus, Inc. Attn: Bankruptcy Po Box 1077 Hartford, CT 06143

United Equitable Mtg 5495 Belt Line Rd Ste 20 Dallas, TX 75254

US Trust N A As Trustee of Bungalow Seri Freidman Vartolo LLP 85 Broad Street Suite 501 New York, NY 10004